

UNITED STATES DISTRICT COURT
DISTRICT OF PUERTO RICO

In re: THE FINANCIAL OVERSIGHT AND MANAGEMENT
BOARD FOR PUERTO RICO, AS REPRESENTATIVE OF
THE COMMONWEALTH OF PUERTO RICO

Debtor

HERMANDAD DE EMPLEADOS DEL FONDO DEL
SEGURO DEL ESTADO, INC.; UNIÓN DE MÉDICOS DE
LA CORPORACIÓN DEL FONDO DEL SEGURO DEL
ESTADO CORP.

Plaintiffs

v.

COMMONWEALTH OF PUERTO RICO; THE FINANCIAL
OVERSIGHT AND MANAGEMENT BOARD FOR PUERTO
RICO; STATE INSURANCE FUND CORPORATION; JESÚS
M. RODRÍGUEZ ROSA; RICARDO ANTONIO ROSSELLÓ
NEVARES; GERARDO PORTELA FRANCO; HON. RAÚL
MALDONADO GAUTIER; JOSÉ IVÁN MARRERO
ROSADO; NATALIE A. JARESKO

Defendants

Case No. 17 BK-3283-LTS
(Jointly Administered)

Chapter PROMESA Title III

Adv. Proc. No. 18- ____-LTS

SUMMONS IN AN ADVERSARY PROCEEDING

To: State Insurance Fund Corporation
Bo. Juan Sánchez PR #2, Km. 8.5
PO Box 248
Bayamón, PR 00960-0248

YOU ARE SUMMONED and required to file a motion or answer to the complaint which is attached to this summons with the clerk of the district court within 30 days after the date of issuance of this summons, except that the United States and its officers and agencies shall file a motion or answer to the complaint within 35 days. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Rolando Emmanuelli Jiménez
PO Box 10779
Ponce, PR 00732

If you make a motion, your time to answer is governed by Fed. R. Bankr. P. 7012.

If you fail to respond to this summons, your failure will be deemed to be your consent to entry of a judgment by the district court and judgment by default may be taken against you for the relief demanded in the complaint.

FRANCES RIOS DE MORAN, ESQ.
CLERK OF COURT

Date:

Signature of Clerk or Deputy Clerk

CERTIFICATE OF SERVICE

I, _____(name), certify that service of this summons and a copy of the complaint was made _____(date) by:

- ☐ Mail service: Regular, first class United States mail, postage fully pre-paid, addressed to:
- ☐ Personal Service: By leaving the process with the defendant or with an officer or agent of defendant at:
- ☐ Residence Service: By leaving the process with the following adult at:
- ☐ Certified Mail Service on an Insured Depository Institution: By sending the process by certified mail addressed to the following officer of the defendant at:
- ☐ Publication: The defendant was served as follows: [Describe briefly]
- ☐ State Law: The defendant was served pursuant to the laws of the State of _____, as follows: [Describe briefly]

If service was made by personal service, by residence service, or pursuant to state law, I further certify that I am, and at all times during the service of process was, not less than 18 years of age and not a party to the matter concerning which service of process was made.

Under penalty of perjury, I declare that the foregoing is true and correct.

Date _____ Signature _____

Print Name: _____

Business Address: _____
